Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART								SMALL ENTITY			OTHER THAN		
T = =			(Column 1)		(Column 2)		<u> </u>	TYPE		OR	SMALL	SMALL ENTITY	
TOTAL CLAIMS			88					RATE	FEE	-	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			99 minus 20=		. 79			X\$ 9=	-	OR	X\$18=		
INDEPENDENT CLAIMS				4 minus 3 =		* /		X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	286	
* If the difference in column 1 is less than zero, enter						olumn 2	_	TOTAL		OR	TOTAL		
	CI		•			OTHER							
		(Column 1)	(Colur			2) (Column 3)		SMALL E	ENTITY	OR	SMALL	ENTITY	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	T CL AINA	= _		X42=		OR	X84=		
	FIRST PRESE	NTATION OF M	OLI IPLE DE	PENDEN	CLAIM		Γ	+140=		OR	+280=		
								TOTAL		OR	TOTAL		
	(Column 1) (Column 2) (Column 3)							DDIT. FEE	L	10	ADDIT. FEE		
		CLAIMS		HIG	HEST		Г		ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER NOUSLY NOOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***				X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT							+140=		OR	+280=		
								TOTAL		OR	TOTAL		
		(Calumn 4)	(Column 2)	Α	DDIT. FEE I		,	ADDIT. FEE					
		(Column 1) CLAIMS			imn 2) HEST	(Column 3)			4001			LABBI	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUI PREV	MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DA	Total	*	Minus	**		=		X\$ 9=	, , , , , ,	OR	X\$18=		
NE NE	Independent	*	Minus	***		=	╽┠	X42=		1	X84=		
	FIRST PRESE	ENTATION OF M	IULTIPLE DE	PENDEN	IT CLAIM		┞	742-		OR	704-		
	16.11	4 :- 1 11	4h a a 4 ! !		to 40" :	duma 2		+140=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the entry in column 1 is less than the entry in column 2. **TOTAL ADDIT. FEE ADDIT. FEE													
"	The "Highest Nur	mber Previously Pa Taber Previously Pa	aid For" (Total o	or Indepen	dent) is the	e highest number	r four	nd in the ap	propriate bo	x in co	olumn 1.		